

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10780318**
APPLICANT(S)

FILED DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT															
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP					
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TOTAL NO. 2							TOTAL NO.							TOTAL NO.						
TOTAL DEP. 48							TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS 50							TOTAL CLAIMS							TOTAL CLAIMS						